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Navy & Marine Corps Medical News  
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Contents of this week's MEDEWS

- 1) TRICARE: Health and Human Services and Department of Defense announce new Medicare option for military retirees
- 2) Information program makes TRICARE enrollment successful
- 3) New baby care program serves Navy, other military medical care providers
- 4) Dental center reschedules holiday office hours to accommodate patients
- 5) Healthwatch: Burn calories with household chores

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Headline: TRICARE: Health and Human Services and Department of Defense announce new Medicare option for military retirees  
From: Office of the Secretary of Defense Health Affairs

WASHINGTON--Health and Human Services Secretary Donna E. Shalala and Department of Defense Secretary William S. Cohen today [Feb 12] announced the TRICARE Senior Project, a demonstration project that will allow Medicare-eligible military retirees to receive comprehensive health care services through military health care facilities.

"I am pleased that the Departments of Defense and Health and Human Services have reached agreement to implement the Medicare Subvention demonstration that my Administration has supported over the last several years, and that Congress authorized as part of the historic Balanced Budget Act of last summer," said President Clinton. "It is my hope that this project will help us reduce medical costs and expand health care options for military retirees, who have selflessly risked their lives for our nation."

The goal of the demonstration is to provide accessible, quality care to Medicare-eligible military retirees and their family members through military treatment facilities while achieving cost effectiveness and to allow both HHS and DoD to optimize resources. Under Medicare Subvention, for the first time, DoD will be able to enroll its Medicare-eligible retirees into the Department's TRICARE Prime program and receive Medicare reimbursement. Medicare-eligible military retirees will receive comprehensive health care services at a lower cost to Medicare. TRICARE Senior Demonstration enrollees will

have better access to care in the military treatment facilities.

"This project provides Medicare and the Department of Defense an opportunity to work together to increase choices available to military retirees who have served their country so well," said Shalala.

"This is a very significant step forward in our efforts to care for all military beneficiaries," said Cohen, "and, with our partners at the Department of Health and Human Services, I believe we can achieve a successful demonstration that will benefit everyone."

The Balanced Budget Act of 1997 authorized this demonstration to include two components. The first, TRICARE Senior Prime, will allow military health facilities in six sites to be treated as Medicare+Choice plans such as HMOs and provide a full range of comprehensive health care benefits to enrolled retirees. These military facilities must meet the same terms as HMOs serving Medicare.

Under TRICARE Senior Prime, DoD will continue to spend as much for the care of retirees in this demonstration as it now spends for these retirees. If DoD spends this amount, then Medicare will pay DoD an amount equal to 95 percent of what Medicare pays HMOs, less the cost of medical education, special payments to hospitals that serve large numbers of low-income patients, and some capital payments that will be excluded because these are included in DoD's appropriations, minus the amount DoD is obligated to spend.

The second component, Medicare Partners, permits military retirees enrolled in a limited number of Medicare+Choice plans to receive Medicare services through military health care facilities. This demonstration allows Medicare+Choice plans to contract with DoD military facilities to provide specialty and inpatient care to military retirees in those plans.

The demonstration will be conducted at the following sites:

- Keesler Air Force Base, Biloxi, Miss.;
- Brooke Army Medical Ctr. and Wilford Hall Medical Ctr,  
San Antonio, Tx.
- Fort Sill, Lawton, Okla. and Sheppard Air Force Base,  
Wichita Falls, Tx.
- Fort Carson and the Air Force Academy, Colorado  
Springs, Col.
- Madigan Army Medical Center, Fort Lewis, Wash.
- Naval Medical Center San Diego, San Diego, Calif.
- Dover Air Force Base, Dover, Del.

Military retirees in these areas may start to enroll in the TRICARE Senior Program after the military health care facilities apply and are accepted into Medicare under the rules that apply to all other health plans serving Medicare. Enrollment at each site will not begin until it is approved as a Medicare+Choice plan. The target date for enrollment to begin at the first sites is summer, with healthcare delivery at the sites beginning 60 days after enrollment starts. The other sites will be phased in to ensure smooth implementation.

Military retirees enrolling in the demonstration must have received some care from military providers in the past or become Medicare-eligible after December 31, 1997. Also, they must be in the Medicare fee-for-service program or switch from a Medicare HMO,

continue to pay monthly Medicare Part B premiums, and agree to receive all their care through the demonstration. To participate in Medicare Partners, a military retiree must be enrolled in a Medicare+Choice plan that contracts with one of the participating military facilities. Beneficiaries in TRICARE Senior Prime will not pay the annual TRICARE Prime enrollment fee.

The two Departments are working together to conduct a comprehensive evaluation of the results of this demonstration.

The Administration has also proposed a similar demonstration for the Department of Veterans Affairs.

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Headline: Information program makes TRICARE enrollment successful  
By Dan Barber, Naval Hospital Twentynine Palms

TWENTYNINE PALMS, Calif.-- According to a recent report from Naval Hospital Twentynine Palms' Managed Care Department, the hospital enjoys a 72 percent overall TRICARE Prime enrollment figure. This is two times higher than the strategic goal the hospital set for itself nearly two years ago.

This high percentage can be attributed to an on-going effort by the hospital leadership and staff to reach its eligible customers and health care providers to educate them in the benefits of the military's new health care plan.

"We go out to all units aboard Marine Corps Air Ground Combat Center (MCAGCC) to present to them the TRICARE program in a way that the most senior and newest Marine or Sailor will understand," said Eric Von Poppin, a Health Benefits Advisors (HBA) at Naval Hospital Twentynine Palms.

Poppin also said that new people reporting to the command are required to check in through the TRICARE Service Center or at satellite locations. According to Poppin, the process ensures individual counseling and, if desired, enrollment in TRICARE.

Teaching doesn't include just the customers and leaders at the MCAGCC. Classes are also held for health care providers at the hospital and in the battalion aid stations on board the MCAGCC. This helps the providers in giving accurate information to patients about the three TRICARE options.

Because the hospital's providers are doing what is right for their patients, 98 percent of enrolled TRICARE Prime patients select the facility as their Primary Care Manager (PCM).

According to Commander James Norton, MSC, the hospital's director for administration, "For the hospital to gain the confidence of our patients in choosing us as their PCM, we have to maintain excellent customer service, a sparkling clean hospital and be a real patient pleaser. Every staff member of the hospital, from the Commanding Officer to the most junior corpsman, strives every day to do just that."

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Headline: New baby care program serves Navy, other military medical care providers  
By CDR Jack H. Klausen MC, Naval Hospital Okinawa

OKINAWA, Japan--Both Navy medicine and military medicine recently improved their care provider capabilities in the Pacific Rim region

with the addition of a baby doctor to the staff of U.S. Naval Hospital (USNH) Okinawa. In a rotating temporary additional duty (TAD) assignment program, perinatologists from Naval Medical Center Portsmouth, Va., Naval Medical Center San Diego and National Naval Medical Center Bethesda will support a pacific area initiative designed to upgrade maternal-infant support.

In this textbook example of taking healthcare to the deckplates, the specialists provide the hospital and the area a full-service obstetrical unit capable of handling routine and complicated obstetrical cases in the Pacific Rim area. One advantage of this new program became immediately apparent. With the arrival of the first physician, LCDR Robert Ghermann, MC, taxpayers saved more than \$490,000 in medical evacuation and area personnel TAD cost savings in less than a month.

Shortly after the program began in January, leaders from USNH Okinawa toured the Pacific Rim hospitals in Osan, Korea; Seoul, Korea and facilities in Japan at Misawa, Yokota, Yokosuka and Iwakuni. They extended offers of obstetrical help to all commands in these areas. The thought was the medical teams all had the same mission, locale and problems so cross service participation seemed like a good fit.

Another plus with this program had to do with location. With complete obstetrical and neonatal services now located in the same time zone, patient referrals are now easier, and the patients are also within quick medical evacuation range. Discussions about patient and provider information with staff at Army, Air Force and other Navy facilities were overwhelmingly positive.

Naval Hospital Okinawa personnel now schedule visits by the perinatologist to the remote facilities to reduce the number of patients sent to Okinawa. Having the baby care specialist onboard also allows medical providers to continue to increase their knowledge of complicated obstetrics through lectures and field experience.

This new program is a winning situation for all involved.

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Headline: Dental center office hours accommodates patients  
From Third Dental Battalion Public Affairs Office

OKINAWA, Japan-Re-engineering business practice to provide better, more convenient customer service not only helps patients, it also reinforces the Naval medical and dental corps' reputation for both "customer first" attitude and excellent professional service. Third Dental Battalion, US Naval Dental Command, Okinawa Japan decided that, as part of its customer service programs, it would adjust schedules to accommodate college students home on holiday break from college. To make that happen during the holiday period, any students needing fillings, cleanings, extractions or root canals would be treated. In addition, maximum effort would be given to complete crowns or bridges.

To provide the service, doctors from the base's "military only" clinics, which are traditionally underused during the holiday period, were shifted to "military family" clinics. There, dental teams worked multiple rooms, and Red Cross volunteers assisted in "team dentistry." To help this effort work, the staff extended clinic hours during weekdays and also scheduled patients on Saturdays.

Bravo Zulu to the dentists, dental technicians, other sailors

and volunteers who unselfishly made this happen.

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Headline: Healthwatch: Burn calories with household chores

So you say you have no time to exercise. Can't make it to the gym. Well, cleaning your home can help. Everyday household chores can offer a good caloric workout. Burning calories while performing tasks around the house is an alternative for people with busy lifestyles.

A clean home is a good price to pay for lost calories. Here are a few general household chores that can help when you just can't make it to the gym or there is just no time to work out. The amount of calories burned will vary from person to person because of height and weight, but generally speaking a 150 pound-person will burn 150 calories when:

Cooking for 48 minutes

Washing windows for 45 to 60 minutes

Stocking shelves for 40 minutes

Cleaning blinds, closets, and shelves for 36 minutes

Mopping floors for 36 minutes

Dusting for 34 minutes

Vacuuming for 34 minutes

Gardening for 30 to 45 minutes

Raking leaves for 30 minutes

Mowing the lawn with a power push mover for 29 minutes

Shoveling snow for 15 minutes

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Feedback and comments are welcome. Story submissions are encouraged. Contact MEDNEWS editor, Earl Hicks, at email <mednews@us.med.navy.mil>, telephone 202/762-3223(DSN 762-3223), or fax 202/762-3224.

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Earl W. Hicks

(202)762-3223/FAX 3224

BUMED Public Affairs Office

2300 E St. N.W.

Washington, DC 20372-5300

mednew@us.med.navy.mil